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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For O	ther Than An		Office Use Only		
NAME OF COMMITTEE (in full)		EC MAILING LAE	BEL Example:li over the lir	typing, type nes		
American College of		ciation				
ADDRESS (number and s	treet) 189	1 Preston White D	Orive			
Check if differe than previously reported. (ACC	ı Res	ston			VA	20191
2. FEC IDENTIFICATI	ON NUMBER	~	CITY 🛕		STATE	ZIPCODE 🛕
C00343459			3. IS THIS REPORT	NEW (N) OR	X AME	ENDED
July 15 Quarterly I October 19 Quarterly I January 3	rts: Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year n-election) (MY)	(d) 30-Day Post -Elect Report for t	con he: Conve	May 20 (M5 Jun 20 (M6) Jul 20 (M7) ry (12P) ention (12C) ral (30G)	Sep 2	in the State of
5. Covering Period	03	01 200	8 thr	ough 03	3 1	2008
Type or Print Name of Tr		and to the best of r R Milton Guibertea		ief it is true, correc	t and complete.	
Signature of Treasurer	Electronically F	Filed by DR Milto	on Guiberteau		Date 08	19 2008
NOTE : Submission of fa	alse, erroneous, d	or incomplete infor	mation may subject th	ne person signing t	his Report to the p	penalties of 2 U.S.C 437g.
Office Use						FEC FORM 3X

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American College of Radiology Association D D " D 03 0 1 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 398231.39 January 1 (b) Cash on Hand at 462609.61 Begining of Reporting Period 39001.35 272731.56 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 501610.96 670962.95 6(a) and 6(c) for Column B) 149122.86 318474.85 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 352488.10 352488.10 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American College of Radiology Association

Report Covering the Period:

м м 0 3

From:

01

2008

-0. 03

^D 3 1

^Y 2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ibutions (other than loans) From: Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	31628.83	231887.60
	(ii) Unitemized	6672.77	38354.35
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	38301.60	270241.95
(b)	Political Party Committees	0.00	0.00
()	Other Political Committees (such as PACs) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	38301.60	270241.95
	sfers From Affiliated/Other Committees	0.00	0.00
13. All Lo	ans Received	0.00	0.00
	Repayments Received	0.00	0.00
(Carr	nds, Rebates, etc.) y Totals to Line 37, page 5) nds of Contributions Made	0.00	0.00
	deral candidates and Other cal Committees	0.00	0.00
	Federal Receipts lends, Interest, etc.)	699.75	2489.61
8. Tran	sfers from Non-Federal and Levin Funds		
` '	lon-Federal Account (from Schedule H3)	0.00	0.00
(b) L	evin Funds (from Schedule H5)	0.00	0.00
(c) T	otal Transfer (add 18(a) and 18(b)).	0.00	0.00
	Receipts (add Lines 11(d), 3, 14, 15, 16, 17, and 18(c))	39001.35	272731.56
	Federal Receipts ract Line 18(c) from Line 19)	39001.35	272731.56

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	4121.00	4121.00
(c) Total Operating Expenditures	4121.00	4121.00
(add 21(a)(i), (a)(ii) and (b))	4121.00	4121.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees	143500.00	310500.00
Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Lean Denouments Made	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(add Lines 20(a), (b), and (c))		
. Other Disbursements	1501.86	3853.85
. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Diah was areas (add Lines 01/a) 00		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	149122.86	318474.85
20, 27, 20, 20, 21, 20(u), 28 diu 30(c))	. 10 122.00	3.3.74.30
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	149122.86	318474.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	38301.60	270241.95
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	38301.60	270241.95
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4121.00	4121.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	4121.00	4121.00

FE6AN026

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 60 (check only one) X 11a
or fo	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. <u>r</u>	Full Name (Last, First, Middle Initial) Dr. Douglas Gallacher Mailing Address 2000 Mowry Ave	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
F	Fremont FEC ID number of contributing ederal political committee.	CA	94538-1716	Amount of Each Receipt this Period 300.00
<u>C</u>	Name of Employer Washington Rad Medical Group Inc. Receipt For: Primary General Other (specify)	, '	tic Radiologist e Year-to-Date ▼ 300.00	
3	Full Name (Last, First, Middle Initial) Dr. Carole Rubin Mailing Address 15110 Whitetail Way			Date of Receipt 0 3 1 1 2 0 0 8
	City North Potomac	State MD	Zip Code 20878-6102	Transaction ID: 23805602 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	20070 0102	250.00
\ <u>c</u>	Name of Employer Washington Radiology Asso- ciates Receipt For: Primary Other (specify)	, '	tic Radiologist e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Kathleen Ward			Date of Receipt
_	Mailing Address 13131 S Longwood Ct	İ		0 3 1 1 2 0 0 8
	City Palos Park	State IL	Zip Code 60464-2184	Transaction ID: 23805605 Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		250.00
<u>a</u>	Name of Employer Loyola University Physici- In Foundation		tic Radiologist	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SU	BTOTAL of Receipts This Page (optional)	1		800.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 60 (check only one) X 11a
or for co	ormation copied from such Reports and Sta ommercial purposes, other than using the i ME OF COMMITTEE (In Full) rerican College of Radiology Associa	name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mail City Nev FEC fede Nan Can	wton C ID number of contributing eral political committee. The of Employer inbridge Health Alliance	_ <u> </u>	Zip Code 02458-2615 Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	eipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 250.00]
Mail City Iow FEC fede Nam Univ nics	va City C ID number of contributing eral political committee. The of Employer of Iowa Hosp and Cli-	State IA C Occupation Diagnostic	Zip Code 52242-1009 Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Hec	eipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 250.00	
Dr	Name (Last, First, Middle Initial) Thomas Harle ling Address	Med State NC	Zip Code 27157-0001	Date of Receipt M M
	ne of Employer ke Forest Univ Sch Med		Radiologist	
Rec	eipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 365.00	
SUBT	OTAL of Receipts This Page (optional)			865.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of adicting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Einitea Bensholt Maiing Address 5827 Rivoli Drive City State Zip Code GA 31210-1449 FEC ID number of contributing federal political committee. City Full Name (Last, First, Middle Initial) Dr. Einitea Bensholt Macon Receipt For: Perinary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Howard Areal Maling Address 8310 Cedar Lake Rd S City Saint Louis Park Min S426-2418 FEC ID number of contributing federal political committee. Name of Employer Aggregate Year-to-Date ▼ Pinnary Other (specify) ▼ Cocupation Diagnostic Radiologist Receipt For: Pinnary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pinnary City State Zip Code Min S426-2418 Transaction ID: 23805649 Amount of Each Receipt In Y y y y y y y y y y y y y y y y y y y	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 17
American College of Radiology Association Full Name (Last, First, Middle Initial) D. Encha Bensholf Malling Address \$827 Rivoli Drive City State Zip Code Macon GA 31210-1449 FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Diagnostic Radiologist Radi	Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Date of Receipt Date of Receipt		sociation	
City Macon GA 31210-1449 FEC ID number of contributing federal political committee Name of Employer Radiology Associates of Macon Receipt For: Primary General Other (specify) ▼ State Zip Code Maining Address 8310 Cedar Lake Rd S City Saint Louis Park MN 55426-2418 FEC ID number of contributing federal political committee C State Zip Code Maining Address 8310 Cedar Lake Rd S City Saint Louis Park MN 55426-2418 FEC ID number of contributing federal political committee C Name of Employer University of Minnescta Physicians Receipt For: Primary General Other (specify) ▼ State Zip Code Magon Transaction ID: 23805649 Annount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date C Date of Receipt Aggregate Year-to-Date Date of Receipt Aggregate Year-to-Date Date of Receipt Transaction ID: 23805650 Annount of Each Receipt this Period Date of Receipt Date of Receipt Aggregate Year-to-Date Date of Receipt Aggregate Year-to-Date Transaction ID: 23805650 Annount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date Transaction ID: 23805650 Annount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date Aggregate Year-to-Date Transaction ID: 23805650 Annount of Each Receipt this Period Transaction ID: 23805650 Annount of Each Receipt this Period Transaction ID: 23805650 Annount of Each Receipt this Period Transaction ID: 23805650 Aggregate Year-to-Date Tr	•		Date of Receipt
Macon FEC ID number of contributing federal political committee. Name of Employer Aggregate Vear-to-Date Volter (specify) Name of Employer Other (specify) Name of Em			03 11 2008
FEC ID number of contributing federal political committee. Name of Employer University of Milmesota Physicians Receipt For: Primary General Cc City Carence Herington Cc Cit		· '	
Name of Employer Aggregate Vear-to-Date ▼	Macon	GA 31210-1449	Amount of Each Receipt this Period
Receipt For:		C	500.00
Receipt For: Primary General Sound S		·	
Primary General Other (specify) ▼		_ ₁	
Mailing Address 8310 Cedar Lake Rd S City State Zip Code Transaction ID: 23805649 Saint Louis Park MN 55426-2418 FEC ID number of contributing federal political committee. Name of Employer University of Minnesota Primary General City State Zip Code TN 38104-5010 FUIl Name (Last, First, Middle Initial) Dr. Clarence Herrington Mailing Address 1584 Carr Ave City State Zip Code TN 38104-5010 Date of Receipt Mn M 1 1 1 1 2 0 0 8 Transaction ID: 23805649 Amount of Each Receipt this Period Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 23805649 Amount of Each Receipt this Period Date of Receipt Transaction ID: 23805649 Amount of Each Receipt Transaction ID: 23805650		500.00	
City Saint Louis Park FEC ID number of contributing federal political committee. Name of Employer University of Minnesota Physicians Receipt For: Primary General Other (specify) ▼ State Zip Code MN 55426-2418 C C Coccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Part of Employer Coccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Transaction ID: 23805649 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: 23805650 Date of Receipt Date of Receipt Transaction ID: 23805650 Amount of Each Receipt this Period C Coccupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	,		Date of Receipt
Saint Louis Park MN 55426-2418 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer University of Minnesota Physicians Receipt For: Primary General Other (specify) ▼ City State Zip Code TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer University of Minnesota Physicians Receipt For: Primary General Other (specify) ▼ City State Zip Code TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Mailing Address 8310 Cedar Lake F	d S	
FEC ID number of contributing federal political committee. Name of Employer University of Minnesota Physicians Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Clarence Herrington Mailing Address 1584 Carr Ave City State Zip Code TN 38104-5010 FEC ID number of contributing federal political committee. City State Zip Code TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼	•	•	
Name of Employer University of Minnesota Physicians Receipt For: Primary	Saint Louis Park	MN 55426-2418	Amount of Each Receipt this Period
University of Minnesota Physicians Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Clarence Herrington Mailing Address 1584 Carr Ave City State Zip Code Transaction ID: 23805650 Memphis TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		C	250.00
Receipt For: Primary General Z50.00	University of Minnesota	· ·	
Tull Name (Last, First, Middle Initial) Dr. Clarence Herrington Mailing Address 1584 Carr Ave City State Zip Code Transaction ID: 23805650 Memphis TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1115.00	Receipt For:	Aggregate Year-to-Date ▼	
Dr. Clarence Herrington Mailing Address 1584 Carr Ave City State Zip Code Memphis TN 38104-5010 FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 23805650 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 365.00	, L	250.00	
City Memphis TN 38104-5010 State Zip Code TN 38104-5010 Amount of Each Receipt this Period C Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 23805650 C Cocupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1115 00	,		Date of Receipt
Memphis TN 38104-5010 Amount of Each Receipt this Period C 365.00 Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 1115.00	Mailing Address 1584 Carr Ave		
FEC ID number of contributing federal political committee. Name of Employer Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1115.00	•	•	Transaction ID: 23805650
Rame of Employer Univ of TN Health Science Center Receipt For: Primary Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date Aggregate Year-to-Date 365.00	<u>Memphis</u>	TN 38104-5010	Amount of Each Receipt this Period
Univ of TN Health Science Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00		C	365.00
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00			
Other (specify) ▼ 365.00	Receipt For:	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		365.00	
ODDITINE OF HOCOPUS THIS Lago (optional)	SURTOTAL of Receipts This Page (actions	1	1115.00
	SUBTUTAL OF Necepts This Page (options	u)	

or f	or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the College of Radiology	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	American College of Radiology Associated			
•		ciation		
	Full Name (Last, First, Middle Initial) Dr. Michael Chaliff		Date of Receipt	
	Mailing Address 195 Grogans Lake Po	03 / 18 / 2008		
	City	State Zip Code	Transaction ID: 23952102	
	Atlanta	GA 30350-3118	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer Diagnostic Imaging Specia-	Occupation Diagnostic Radiologist		
	lists, P.A Receipt For:	Aggregate Year-to-Date ▼	_	
	Primary General Other (specify) ▼	250.00		
	Full Name (Last, First, Middle Initial) Dr. Salil Parikh		Date of Receipt	
	Mailing Address 9477 Johnson Rd Ext	03 / 18 / Y Y Y Y Y		
	City	State Zip Code	Transaction ID: 23952103	
	Germantown	TN 38139-3603	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer Radiology Assoc of Ocala	Occupation Diagnostic Radiologist		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
	Full Name (Last, First, Middle Initial) Dr. Bruce Arose		Date of Receipt	
	Mailing Address 11 Windsor Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: 23952105	
	Farmington	CT 06032-1458	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	7	
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼	250.00]	
SI	JBTOTAL of Receipts This Page (optional)		750.00	

CHEDULE A (FEC Form 3X FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 60 (check only one) X
ny information copied from such Reports and r for commercial purposes, other than using t	d Statements may the name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation		
Full Name (Last, First, Middle Initial) Dr. Robert Harris			Date of Receipt
Mailing Address 42 Wildwood Dr			03 / 18 / 2008
City West Lebanon	State NH	Zip Code 03784-3117	Transaction ID: 23952108 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer Dartmouth-Hitchcock Med Ctr	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Michael Soehnlen			Date of Receipt
Mailing Address 18882 Withrich Rd			03 18 2008
City	State	Zip Code	Transaction ID: 23952119
<u>Dalton</u>	OH	44618-8923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates of	Occupatio	n ic Radiologist	
Canton Receipt For:		e Year-to-Date	
Primary General Other (specify) ▼	7 igg ogaic	250.00]
Full Name (Last, First, Middle Initial) Dr. Frederick Conard, III			Date of Receipt
Mailing Address 22 Sunset Farm Rd			03 18 2008
City	State	Zip Code	Transaction ID: 23952121
West Hartford	СТ	06107-1314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Jefferson Radiology		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	·)		850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 1			
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
American College of Radiology Associ	ciation				
Full Name (Last, First, Middle Initial) Dr. Thomas Poulton Mailing Address Aultman Hospital		Date of Receipt			
2600 6th St SW		03 18 2008			
City	State Zip Code	Transaction ID: 23952122			
Canton	OH 44710-1799	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Aultman Hospital	Occupation Diagnostic Radiologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	250.00				
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl	1	Date of Receipt			
City	State Zip Code	Transaction ID: 23952329			
<u>Pacolet</u>	SC 29372-3516	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer Greenville Radiology, P.A.	Occupation Diagnostic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial) Dr. Terry Martin		Date of Receipt			
Mailing Address Rad Assoc of Biirming 2090 Columbiana Rd	gham PC Ste 4400	03 / 18 / 2008			
City	State Zip Code	Transaction ID: 23952381			
Birmingham	AL 35216-2152	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer Rad Assoc of Biirmingham PC	Occupation Diagnostic Radiologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	300.00				
SUBTOTAL of Receipts This Page (optional) .		450.00			
TOTAL This Period (last page this line number	·				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 60 (check only one) X
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Cour	t Rd		Date of Receipt 0 3 1 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 23952402
	Birmingham	AL	35242-0525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Birmingham Radiological Group P.C. Receipt For: Primary General Other (specify) ▼	, '	n tic Radiologist e Year-to-Date ▼ 250.02	
- 3.	Full Name (Last, First, Middle Initial) Dr. Janet Storella Mailing Address 6515 Fallwind Ln			Date of Receipt
	City	State	Zip Code	0 3 1 8 2 0 0 8 Transaction ID: 23953354
	Bethesda	MD	20817-4941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
_	Full Name (Last, First, Middle Initial) Dr. Richard Aizpuru			Date of Receipt
	Mailing Address 3936 Xerxes Ave S			03 18 2008
	City	State	Zip Code	Transaction ID: 23953379
	Minneapolis	MN	55410-1135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer St Paul Radiology PA	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
	SUBTOTAL of Receipts This Page (optional) .	1		643.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation	
Full Name (Last, First, Middle Initial) Dr. Matthew Baldwin		Date of Receipt
Mailing Address 865 Mark Avenue Ct N	State Zip Code	0 3 1 8 2 0 0 8 Transaction ID: 23953380
Lake Elmo	MN 55042-7600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	390.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Baraga		Date of Receipt
Mailing Address 4340 Reiland Ln		03 / 18 / 2008
City	State Zip Code	Transaction ID: 23953381
Shoreview	MN 55126-3131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	390.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Barkmeier		Date of Receipt
Mailing Address 4230 Basswood Rd		03 / 18 / 2008
City	State Zip Code	Transaction ID: 23953383
Saint Louis Park FEC ID number of contributing federal political committee.	MN 55416-3849	Amount of Each Receipt this Period 390.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optional)		1170.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 60 (check only one) X 11a 11b 11c 12
	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation	
Full Name (Last, First, Middle Initial) Dr. Carl Bretzke		Date of Receipt
Mailing Address 166 4th St E	7.0.1	03 / 18 / 2008
City Saint Paul	State Zip Code MN 55101-1400	Transaction ID: 23953385
FEC ID number of contributing federal political committee.	C 55101-1400	Amount of Each Receipt this Period 390.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. George Edmonson		Date of Receipt
Mailing Address 6621 Iroquois Trl		03 18 2008
City	State Zip Code	Transaction ID: 23953386
<u>Edina</u>	MN 55439-1015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	520.00
Name of Employer St Paul Radiology PA	Occupation Interventional Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	520.00	
Full Name (Last, First, Middle Initial) Dr. Brian Fiedler		Date of Receipt
Mailing Address 2721 Burnham Blvd		03 18 2008
City	State Zip Code	Transaction ID: 23953387
Minneapolis	MN 55416-4381	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)	1170.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 60 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial) Dr. Dominic Frecentese			Date of Receipt
Mailing Address 518 Liberty Pkwy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Stillwater	State MN	Zip Code 55082-8395	Transaction ID: 23953389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		390.00
Name of Employer St Paul Radiology PA	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. Ronnell Hansen			Date of Receipt
Mailing Address 1414 E Pond Rd			03 18 2008
City Eagan	State MN	Zip Code 55122-2879	Transaction ID: 23953390 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00122 2070	520.00
Name of Employer St Paul Radiology PA	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Hartigan			Date of Receipt
Mailing Address 9852 Adam Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23953391
Inver Grove Height FEC ID number of contributing federal political committee.	C	55077-4729	Amount of Each Receipt this Period 520.00
Name of Employer St Paul Radiology PA	Occupatio	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 520.00	
			1430.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 60 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass		,,	
Full Name (Last, First, Middle Initial) Dr. Steven Hommeyer			Date of Receipt
Mailing Address 317 Woodlawn Ave			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City Saint Paul	State MN	Zip Code 55105-1239	Transaction ID: 23953392
FEC ID number of contributing federal political committee.	C	33103-1239	Amount of Each Receipt this Period 390.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. David Kispert	I		Date of Receipt
Mailing Address St Paul Radiology F 166 4th St E Ste 10			03 18 2008
City Saint Paul	State MN	Zip Code 55101-1474	Transaction ID: 23953393 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		260.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ ,	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. John Knoedler, JR			Date of Receipt
Mailing Address 14 Island Rd			0 3 1 8 2 0 0 8
City	State	Zip Code	Transaction ID: 23953394
North Oaks FEC ID number of contributing federal political committee.	C	55127-2608	Amount of Each Receipt this Period 520.00
Name of Employer St Paul Radiology PA	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 520.00	
SUBTOTAL of Receipts This Page (optional			1170.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 60 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation		
Α.	Full Name (Last, First, Middle Initial) Dr. Anders Knutzen			Date of Receipt
	Mailing Address 259 Woodlawn Ave			03 / 18 / 2008
	City	State MN	Zip Code	Transaction ID: 23953395
	Saint Paul FEC ID number of contributing federal political committee.	C	55105-1238	Amount of Each Receipt this Period 520.00
	Name of Employer St Paul Radiology, PA	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 520.00	
– В.	Full Name (Last, First, Middle Initial) Dr. Jorge Leon	1		Date of Receipt
	Mailing Address 1399 Edgcumbe Rd			03 18 2008
	City	State	Zip Code	Transaction ID: 23953396
	Saint Paul FEC ID number of contributing federal political committee.	C	55116-1778	Amount of Each Receipt this Period 520.00
	Name of Employer St Paul Radiology PA	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
_ С.	Full Name (Last, First, Middle Initial) Dr. Deborah Longley			Date of Receipt
	Mailing Address 1516 Edgcumbe Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23953397
	Saint Paul FEC ID number of contributing federal political committee.	C	55116-2301	Amount of Each Receipt this Period 260.00
	Name of Employer St Paul Radiology	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 260.00	
	SUBTOTAL of Receipts This Page (optional) .	1		1300.00
T	TOTAL This Period (last page this line number	r onlv)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 60 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Michael Madison Mailing Address 4604 Moorland Ave)		Date of Receipt 0 3
City Edina FEC ID number of contributing federal political committee.	State MN	Zip Code 55424-1159	Transaction ID: 23953398 Amount of Each Receipt this Period 520.00
Name of Employer St Paul Radiology PA Receipt For: Primary General Other (specify) ▼	_ ' _ ` _	n ic Radiologist e Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) Dr. Alexandra Muschenheim Mailing Address 2294 Stanford Ct	I		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23953401
Saint Paul FEC ID number of contributing federal political committee.	C	55105-1225	Amount of Each Receipt this Period 1040.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1040.00]
Full Name (Last, First, Middle Initial) Dr. Theodore Passe	I		Date of Receipt
Mailing Address 280 Saint Andrews	Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23953402
Hudson FEC ID number of contributing federal political committee.	C	54016-8072	Amount of Each Receipt this Period 260.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional	al)		1820.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation	
Full Name (Last, First, Middle Initial) Dr. Michael Rosenberg Mailing Address 4187 Amberleaf Trl		Date of Receipt
City	State Zip Code	M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Eagan	MN 55123-1498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	390.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. Vladimir Savcenko		Date of Receipt
Mailing Address 168 6th St E Unit 4501		03 / 18 / 2008
City	State Zip Code	Transaction ID: 23953404
Saint Paul	MN 55101-2908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Robert Schubert		Date of Receipt
Mailing Address 15 Lost Rock Ln		03 18 2008
City	State Zip Code	Transaction ID: 23953405
North Oaks	MN 55127-2617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)		910.00
TOTAL This Period (last page this line number of	· ·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 60 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	η not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Patrick Sullivan			Date of Receipt
Mailing Address 2637 E Lake Of Isla	es Pkwy State	Zip Code	M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Minneapolis	MN	55408-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		260.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. David Swanson			Date of Receipt
Mailing Address 1510 Edgcumbe Ro	a		03 18 2008
City	State	Zip Code	Transaction ID: 23953494
Saint Paul	MN	55116-2301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		260.00
Name of Employer St Paul Radiology PA		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Dr. Susan Truman	'		Date of Receipt
Mailing Address 767 Linwood Ave			03 18 7 2008
City	State	Zip Code	Transaction ID: 23953495
Saint Paul	MN	55105-3323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		520.00
Name of Employer St Paul Radiology PA		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
SUBTOTAL of Receipts This Page (optional	- D		1040.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and	nd Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	<u> </u>	cress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Weinmann, IV Mailing Address 4893 E Lake Harrie	et Pkwy		Date of Receipt
City	State	Zip Code	0 3 1 8 2 0 0 8 Transaction ID: 23953496
<u>Minneapolis</u>	MN	55409-2222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		390.00
Name of Employer St Paul Radiology PA		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Dr. Keith Wittenberg	l		Date of Receipt
Mailing Address 1780 Mississippi R	iver Blvd S		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23953497
Saint Paul	MN	55116-2650	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		520.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) Dr. Peter Wold			Date of Receipt
Mailing Address 1976 Pine Ridge Di	r		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Saint Paul	State MN	Zip Code 55118-4747	Transaction ID: 23953499 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		520.00
Name of Employer St Paul Radiology PA	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 520.00	
SUBTOTAL of Receipts This Page (optional	al)		1430.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 60 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Robert Gould Mailing Address 10626 N Turnberry	Dr		Date of Receipt
City Mequon FEC ID number of contributing	State WI	Zip Code 53092-6309	0 3 1 8 2 0 0 8 Transaction ID: 23953561 Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) ▼ Name of Employer Radiology Specialists of Milwaukee, S. Receipt For: Other (specify) ▼	Occupation Diagnost	n ic Radiologist • Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Vivek Yagnik Mailing Address 6210 Pickens St			Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23977516
Houston	TX	77007-2016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Baylor College of Medicine	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Stephen Rupp			Date of Receipt
Mailing Address 4100 Yarrow Dr NE			03 20 7 2008
City	State	Zip Code	Transaction ID: 23977558
Grand Rapids FEC ID number of contributing federal political committee.	C	49525-9531	Amount of Each Receipt this Period 365.00
Name of Employer Kent Radiology, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 365.00	
SUBTOTAL of Receipts This Page (optional	ત્રી)		1615.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 60 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the succession of the succes	Statements may not be sold or used by any personen name and address of any political committee to ciation	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Date of Receipt
Dr. Justine Dautenhahn Mailing Address 149 Lake Aluma Driv	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23977560
Oklahoma City	OK 73121-3401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Norman Radiology Services,	Occupation Diagnostic Padialogist	7
Inc. Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Steven Birnbaum	_L	Date of Receipt
Mailing Address 20 Worcester Center	Boulevard	M M / D D / Y Y Y Y Y Y Y Y Y Y Z O O 8
City	State Zip Code	Transaction ID: 23977561
Worcester	MA 01608-1320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Associated Radiologists, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Milstein	. L	Date of Receipt
Mailing Address 3335 Brookview Dr		03 31 YYYY 2008
City	State Zip Code	Transaction ID: 24139147
Eugene	OR 97401-1595	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oregon Medical Group	Occupation Diagnostic Radiologist	7
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		1750.00

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such or for commercial purposes, oth NAME OF COMMITTEE (In American College of Ra	er than using the name and a Full)	nay not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middl Dr. Michael Tuite Mailing Address 7699 Le	,		Date of Receipt 0 3 3 1 2 0 0 8
City	State	Zip Code	Transaction ID: 24139148
Verona FEC ID number of contributi federal political committee.	mg C	53593-8631	Amount of Each Receipt this Period 500.00
Name of Employer University of Wisconsin Hospital Receipt For: Primary General Other (specify) ▼	Aggrega	tion stic Radiologist ate Year-to-Date ▼ 500.00	
	t Mem Lutheran Hospita	I	Date of Receipt
9200 W City	Wisconsin Ave State	Zip Code	0 3 3 1 2 0 0 8 Transaction ID: 24139149
Milwaukee	WI	53226-3596	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	ng C		365.00
Name of Employer Medical College of Wisons- in	Occupa Diagno	tion stic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middl Dr. Michael Bruce Gotway	e Initial)		Date of Receipt
Mailing Address 7101 E	Berneil Ln		03 31 2008
City	State	Zip Code	Transaction ID: 24141965
Paradise Valley FEC ID number of contributi federal political committee.	AZ C	85253-1973	Amount of Each Receipt this Period 225.00
Name of Employer Scottsdale Medical Imaging	Occupa Diagno	tion estic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggrega	ate Year-to-Date 225.00	
SUBTOTAL of Receipts This	Page (optional)		1090.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 60 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation		
Full Name (Last, First, Middle Initial) Dr. William Horsley			Date of Receipt
Mailing Address Scottsdale Medical I 3501 N Scottsdale F	Rd Ste 130		03 / 31 / 2008
City	State	Zip Code	Transaction ID: 24141972
<u>Scottsdale</u>	AZ	85251-5649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnost	n ic Radiologist	
Receipt For:	_ '	Year-to-Date ▼	
Primary General Other (specify) ▼	33 13411	300.00]
Full Name (Last, First, Middle Initial) Dr. Janet Storella			Date of Receipt
Mailing Address 6515 Fallwind Ln			0 3 3 1 2 0 0 8
City	State	Zip Code	Transaction ID: 24141974
Bethesda	MD	20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) Dr. Lloyd Logue			Date of Receipt
Mailing Address 3943 Indian Springs	Rd		03 31 2008
City	State	Zip Code	Transaction ID: 24141976
Panama City	FL	32404-5794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		600.00]
			540.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	I Statements may not be sold or used by any person the name and address of any political committee to ociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR Mailing Address 710 Bunkers Cove R City Panama City FEC ID number of contributing federal political committee.	State Zip Code FL 32401-3920 C	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Bay Radiology Associates Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 600.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Presser Mailing Address 706 Bunkers Cove R	dd	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Panama City FEC ID number of contributing federal political committee. Name of Employer	State Zip Code FL 32401-3920 C Occupation	Transaction ID: 24141978 Amount of Each Receipt this Period 200.00
Bay Radiology Associates, P.A. Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Scott Ramey Mailing Address Bay Radiology Asso	- DA	Date of Receipt
Mailing Address Bay Radiology Assor PO Box 1770 City Panama City	State Zip Code FL 32402-1770	Transaction ID: 24141979 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Bay Radiology Associates, P.A. Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional)	>	600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to pociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Strohmenger Mailing Address 2818 Canal Dr City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For:	State Zip Code FL 32405-1610 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. James Bognanno	600.00	Date of Receipt
Mailing Address 12572 Branford St City Carmel FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼	State Zip Code IN 46032-7243 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Transaction ID: 24141982 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Scott Childress Mailing Address 7340 Shadeland Sta City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For:	tion Ste 200 State Zip Code IN 46256-3980 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	250.00	700.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 60 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	Ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation		
Full Name (Last, First, Middle Initial) Dr. Karen Ehrman			Date of Receipt
Mailing Address Irvington Radiologists 7340 Shadeland Sta	s PC Ste 200		03 / 31 / 2008
City	State	Zip Code	Transaction ID: 24141984
<u>Indianapolis</u>	IN	46256-3980	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For:	_ ' _ <u>*</u> _	e Year-to-Date ▼	1
Primary General Other (specify) ▼	1.39.594.6	250.00	
Full Name (Last, First, Middle Initial) Dr. Mark Fox	-		Date of Receipt
Mailing Address 3596 Linkside Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24141985
Carmel	IN	46032-9388	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Bryan Hankins			Date of Receipt
Mailing Address 8452 Sunningdale Bl	vd		03 31 7 2008
City	State	Zip Code	Transaction ID: 24141986
Indianapolis	IN	46234-1784	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00]
			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	of the Crieck only one)
or for commercial purposes, other than using the	Statements may not be sold or used be name and address of any political co	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation	
Full Name (Last, First, Middle Initial) Dr. Todd Harris		Date of Receipt
Mailing Address 5880 Sunset Ln	State 7's Code	03 / 31 / 2008
City Indianapolis	State Zip Code IN 46228-1450	Transaction ID: 24141987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Dr. Susan Ivancevich Mailing Address 365 East 75th Street	l	Date of Receipt
Walling Address 303 East 75th Street		03 31 2008
City	State Zip Code	Transaction ID: 24141988
Indianapolis	IN 46240-2845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Dr. Kenyon K. Kopecky		Date of Receipt
Mailing Address 650 Sugarbush Dr		03 / 03 / 2008
City Zionsville	State Zip Code IN 46077-1907	Transaction ID: 24141989
FEC ID number of contributing federal political committee.	C 46077-1907	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists,	Occupation Diagnostic Radiologist	
PC Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		50.00
		750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	38)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 60 (check only one)
Any information copied from such Report or for commercial purposes, other than us	s and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology		· · ·	
Full Name (Last, First, Middle Initial) Dr. Jean Kraft			Date of Receipt
Mailing Address 5187 Sue Dr			03 31 2008
City Carmel	State IN	Zip Code 46033-8669	Transaction ID: 24141990 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40000 0000	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. David Kurlander	I		Date of Receipt
Mailing Address 12511 Glendurg	an Dr		03 31 2008
City Carmel	State IN	Zip Code 46032-8314	Transaction ID: 24141992
FEC ID number of contributing federal political committee.	C	40032-0314	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Dale McCarter			Date of Receipt
Mailing Address 7150 N Pennsylv	vania St		0 3 3 1 2 0 0 8
City Indianapolis	State IN	Zip Code	Transaction ID: 24141993
FEC ID number of contributing federal political committee.	C	46240-3036	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologist	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (opti	I (engl)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedul for each category of th Detailed Summary Pa	ne (crick only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by a e name and address of any political comr	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
American College of Radiology Asso	ciation	
Full Name (Last, First, Middle Initial) Dr. Gordon McLaughlin, III		Date of Receipt
Mailing Address 8440 Coral Reef Ct		03 31 2008
City	State Zip Code	Transaction ID: 24141994
<u>Indianapolis</u>	IN 46256-9505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists,	Occupation	
<u>P.C.</u>	Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250	.00
Full Name (Last, First, Middle Initial) Dr. Bruce Richmond		Date of Receipt
Mailing Address 8106 Halyard Way		0 3 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 24141995
Indianapolis	IN 46236-9567	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250	.00
Full Name (Last, First, Middle Initial) Dr. Scott Savader		Date of Receipt
Mailing Address Irvington Radiologists 7340 Shadeland Stat		03 / 31 / 2008
City	State Zip Code	Transaction ID: 24141996
Indianapolis	IN 46256-3980	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250	.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 60 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation		
Full Name (Last, First, Middle Initial) Dr. Stephan Stockberger, JR			Date of Receipt
Mailing Address 8352 Skipjack Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24141998
Indianapolis FEC ID number of contributing federal political committee.	C	46236-9582	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Michael Swack	I		Date of Receipt
Mailing Address 9703 Hunt Club Rd			03 31 7 2008
City Zionsville	State IN	Zip Code 46077-8454	Transaction ID: 24141999 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10077 0131	250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Perry Wethington	I		Date of Receipt
Mailing Address 12060 Landover La	ıne		03 31 2008
City	State IN	Zip Code	Transaction ID: 24142000
Fishers FEC ID number of contributing federal political committee.	C	46038-9548	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 60 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	ne name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joseph Yedlicka Mailing Address 9034 Bay Breeze Ct City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists,	State Zip Code IN 46236-9170 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
P.C. Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone Mailing Address 440 E 62nd St Apt 18	BF	Date of Receipt 0 3
City	State Zip Code	Transaction ID: 24142002
New York FEC ID number of contributing federal political committee. Name of Employer	NY 10065-8345 C Occupation	Amount of Each Receipt this Period 76.92
Name of Employer Hackensack Radiology Group Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 269.22	
Full Name (Last, First, Middle Initial) Dr. Rita S. Patel		Date of Receipt
Mailing Address 3 Ware Rd		03 / 31 / 2008
City	State Zip Code	Transaction ID: 24142004
Upper Saddle River FEC ID number of contributing federal political committee.	NJ 07458-1919	Amount of Each Receipt this Period 76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	
SUBTOTAL of Receipts This Page (optional)		403.84

Any or f		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation	
١.	Full Name (Last, First, Middle Initial) Dr. Mitchell Miller		Date of Receipt
	Mailing Address 2 Constitution Ct Apt	1009 State Zip Code	0 3
	City Hoboken	NJ 07030-6730	Transaction ID: 24142005 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	76.92
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 269.22	
	Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce	I	Date of Receipt
	Mailing Address 47-30 Vernon Blvd Ur		03 / 01 / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	City	State Zip Code	Transaction ID: 24142006
	Long Island City	NY 11101-5546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	76.92
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	
	Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde		Date of Receipt
	Mailing Address 7 Kinkaid Ave		03 / 01 / 2008
	City	State Zip Code	Transaction ID: 24142007
	Closter	NJ 07624-2908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	76.92
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	
SI	JBTOTAL of Receipts This Page (optional) .		230.76

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 60 (check only one) X
or for comme	ion copied from such Reports and Sercial purposes, other than using the COMMITTEE (In Full) an College of Radiology Assoc	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. Adam Mailing A	e (Last, First, Middle Initial) Bogomol ddress 50 W 72nd St Apt 150	09		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	ui.	State	Zip Code	Transaction ID: 24142008
	umber of contributing litical committee.	C	10023-4132	Amount of Each Receipt this Period 76.92
Receipt F	Employer ack Radiology Group for: nary General er (specify) •	, ' - <u>'</u> -	tic Radiologist e Year-to-Date ▼ 269.22	
		y Medical Ct	r	Date of Receipt
City	30 Prospect Ave	03 31 2008		
Hacken	sack	State NJ	Zip Code 07601-1914	Transaction ID: 24142010 Amount of Each Receipt this Period
FEC ID n	umber of contributing olitical committee.	C		76.92
Name of Hackens	Employer ack Radiology Group	Occupation Diagnost	n tic Radiologist	
	or: nary General er (specify) ♥	Aggregate	e Year-to-Date ▼ 269.22	
Full Name Dr. Arthur	e (Last, First, Middle Initial) S. Albert			Date of Receipt
Mailing A	ddress 124 W 60th St Apt 45			03 / 31 / 2008
City		State	Zip Code	Transaction ID: 24142011
	rk umber of contributing litical committee.	NY C	10023-7451	Amount of Each Receipt this Period 76.92
Name of Hackens	Employer ack Radiology Group	Occupation	on tic Radiologist	
	or: nary General er (specify) ▼	, ' 	e Year-to-Date ▼ 269.22	
SUBTOTAL	of Receipts This Page (optional)	1		230.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 60 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may e name and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation		
Full Name (Last, First, Middle Initial) Dr. Robert Krugman			Date of Receipt
Mailing Address 10 Lexington Ct			03 / 31 / Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24142012
Englewood	NJ	07631-3081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.22	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason			Date of Receipt
Mailing Address 506 Julie Ct			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City	State	Zip Code	Transaction ID: 24142013
Wyckoff	NJ	07481-1101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 269.22	
Full Name (Last, First, Middle Initial) Dr. David Panush	1		Date of Receipt
Mailing Address 538 E 84th St Apt 4E			03 31 7 2008
City	State	Zip Code	Transaction ID: 24142014
New York	NY	10028-7357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.22	
SUBTOTAL of Receipts This Page (optional)			230.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any personant the name and address of any political committee to sociation	
Full Name (Last, First, Middle Initial) Dr. Joel Rakow Mailing Address 505 Ivy Lane		Date of Receipt M
City Wyckoff FECUR number of contributing	State Zip Code NJ 07481-1072	Transaction ID: 24142016 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	76.92
Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 269.22	
Full Name (Last, First, Middle Initial) Dr. Patrick Toth Mailing Address 201 E 80th St Apt 8	F	Date of Receipt 0 3 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 24142017
New York	NY 10021-0515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22]
Full Name (Last, First, Middle Initial) Dr. John DeMeritt		Date of Receipt
Mailing Address 18 Baldwin Rd		03 7 31 7 2008
City	State Zip Code	Transaction ID: 24142018
Saddle River FEC ID number of contributing federal political committee.	NJ 07458-3203	Amount of Each Receipt this Period 76.92
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	
SUBTOTAL of Receipts This Page (options	I)	230.76

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 60 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
∠ 4.	Full Name (Last, First, Middle Initial) Dr. Joel Budin Mailing Address 140 Chestnut St			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Englewood FEC ID number of contributing federal political committee.	State NJ	Zip Code 07631-3033	Transaction ID: 24142019 Amount of Each Receipt this Period 76.92
	Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼	Occupatio Diagnost	n ic Radiologist e Year-to-Date ▼ 269.22	
_ 3.	Full Name (Last, First, Middle Initial) Dr. Susan Edwards Mailing Address 13101 Waterrock Ln			Date of Receipt 0 3 2 3 2 0 0 8
	City Arcadia FEC ID number of contributing	State OK	Zip Code 73007-7631	Transaction ID: 24142061 Amount of Each Receipt this Period 2500.00
	Receipt For: Primary General	Occupatio Diagnost	ic Radiologist e Year-to-Date ▼	
_	Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Bibb Allen, JR Mailing Address 2000A Southbridge Pkv	va Cto 200	2500.00	Date of Receipt
	City Birmingham	State	Zip Code 35209-1327	0 3 3 1 2 0 0 8 Transaction ID: 24142081
	FEC ID number of contributing federal political committee.	C	33209-1327	Amount of Each Receipt this Period 250.00
	Name of Employer Montclair Baptist Medical Center Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			2826.92
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 60 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Dr. Marcela Bohm-Velez Mailing Address Weinstein Imaging Ass 5850 Centre Ave	sociates		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 24142154
	Pittsburgh FEC ID number of contributing federal political committee.	C	15206-3780	Amount of Each Receipt this Period 166.67
	Name of Employer Weinstein Imaging Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, <u> </u>	tic Radiologist e Year-to-Date ▼ 500.01	
- В.	Full Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR Mailing Address Central LA Imaging Inc 3704 North Blvd Ste A	3		Date of Receipt 0 3 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 24142178
	Alexandria	LA	71301-3606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Central LA Imaging Inc.	Occupation	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	,	e Year-to-Date ▼ 250.02	
-).	Full Name (Last, First, Middle Initial) Dr. Gerald Dodd, III			Date of Receipt
	Mailing Address Univ of Colorado Hlth 12401 E 17th Ave, Lep		m	03 / 31 / 2008
	City	State	Zip Code	Transaction ID: 24142183
	Aurora FEC ID number of contributing federal political committee.	CO	80045-7155	Amount of Each Receipt this Period 83.34
	Name of Employer Univ of Texas HIth Sci Ctr	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.02	
	SUBTOTAL of Receipts This Page (optional)			333.35
ſ	TOTAL This Period (last page this line number	only)		

A.

В.

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 40 / 60 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Date of Receipt Dr. Eric Sax Mailing Address 9 Old Sudbury Rd 03 3 1 2008 Zip Code City State Transaction ID: 24142427 Lincoln MA 01773-4807 Amount of Each Receipt this Period FEC ID number of contributing 83.34 C federal political committee. Name of Employer The Imaging Institute Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date General Primary 250.02 Other (specify) Full Name (Last, First, Middle Initial) Dr. Arthur Sandy Date of Receipt Mailing Address 2821 Argyle Rd 0 3 31 2008 City State Zip Code Transaction ID: 24142457 **Birmingham** ΑL 35213-3403 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Advanced Imaging Assoc of Occupation Diagnostic Radiologist

		400.04
SUBTOTAL of Receipts This Page (optional)	•	183.34
TOTAL This Period (last page this line number only)	•	31628.83

Aggregate Year-to-Date

300.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fc	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 41 / 60 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
American College of Radiology Assoc	ciation		
Full Name (Last, First, Middle Initial) Vanguard			Date of Receipt
Mailing Address PO Box 13750			03 31 7 2008
City	State	Zip Code	Transaction ID: 24330099
<u>Philadelphia</u>	PA	19101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		699.75
Name of Employer	Occupation		1
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 2489.61	Interest

SUBTOTAL of Receipts This Page (optional)	•	699.75
TOTAL This Period (last page this line number only)	•	699.75

		3 (FEC Form	- 1	Use sep	arate schedule(s)	_		NUMB	ER:		Р	AGE	42 / 6	0
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/ N	AME OF COM	MITTEE (In Full) ege of Radiology A			oo or any pomioa	 		511011 0011		110 1101		-		
	ull Name (Last,	First, Middle Initial)						1	saction of Dis		2326 ment	9813		
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	ity /ASHINGTOI	N		tate OC	Zip Code 20003			Amo	ount of	Each [Disburs			-
_	urpose of Disbu	rsement				011						50	00.00)
C	andidate Name APPAC					tegor Type	'y /							
	ffice Sought:	House Senate President		nent For: Primary Other (spe	General ecify) ▼									
	tate:	District: First, Middle Initial)									20.44			
	rowley For C							1	of Dis	burser				
M	ailing Address	84-56 Grand A	venue					0 3	3 M /	^D 0	5 /	^Y 2	0 0 8	Y
	ity Imhurst			tate IY	Zip Code 11373			Amo	ount of	Each [Disburs	ement	t this P	erio
Pı	urpose of Disbu	rsement				011						25	00.00)
	andidate Name ep. Joseph C	rowley				tegor Type	ry/							
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	tate: NY	District: 07 First, Middle Initial)						T		ID:	2342	0074		
	angel For Co	. ,						Date	of Dis	burser	ment			Υ
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	ity ew York			tate IY	Zip Code 10027			Amo	ount of	Each [Disburs			-
Pı	urpose of Disbu	rsement				011					-	25	00.00)
	andidate Name ep. Charles E	B. Rangel				tegor Γype	y/							
Ot	ffice Sought:	X House Senate President		nent For: Primary Other (spe	2008 General									
		District: 15	I					1						
St	tate: NY	District. 15												

CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	(check only	NUMBER: PAGE 43 / 60
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
any Information copied from such Reports and State of commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American College of Radiology Associates	me and address of any politica		
Full Name (Last, First, Middle Initial) Rangel For Congress			Transaction ID: 23423675 Date of Disbursement
Mailing Address PO Box 5577 Manhattanville Sta			03 06 7 2008
City New York	State Zip Code NY 10027		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Rep. Charles B. Rangel		Category/ Type	
Senate President	rsement For: 2008 Primary X General Other (specify) ▼		
State: NY District: 15 Full Name (Last, First, Middle Initial)			
Pete PAC			Transaction ID: 23427215 Date of Disbursement
Mailing Address 7804 Evening Lane			03
City Alexandria	State Zip Code VA 22306		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name Pete PAC		Category/ Type	
Senate President	rsement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			- "
Collins For Senator			Transaction ID: 23497257 Date of Disbursement
Mailing Address PO Box 1096			03
City Bangor	State Zip Code ME 04402		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3000.00
Candidate Name Sen. Susan M. Collins		Category/ Type	
Office Sought: House X Senate President Disbu	rsement For: 2008 Primary X General Other (specify)	•	
State: ME District:			
			10500.00

	CHEDULE B (FEC Form	Y Use sepa	arate schedule(s)		NUMBER: PAGE 44 / 60
IT	EMIZED DISBURSEME	NTS for each	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 1
An	y Information copied from such Report	s and Statements may n	ot be sold or used	d by any person t	for the purpose of soliciting contributions licit contributions from such committee
V	NAME OF COMMITTEE (In Full)	sing the name and addre	ss of any political	Committee to so	micit contributions from such committee
/	American College of Radiology	Association			
	Full Name (Last, First, Middle Initial) Friends Of Weiner				Transaction ID: 23744928 Date of Disbursement
	Mailing Address 1 Ascan Aven Suite 31	ue			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} \end{bmatrix}$
	City Forest Hills	State NY	Zip Code 11375		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1000.00
	Candidate Name Rep. Anthony D. Weiner			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2008 General		
	State: NY District: 09				
	Full Name (Last, First, Middle Initial) Gingrey For Congress				Transaction ID: 23744983 Date of Disbursement
	Mailing Address PO Box U				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & O & N \\ 2 & 0 & 0 & 8 \end{smallmatrix} $
	City Marietta	State GA	Zip Code 30060		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2000.00
	Candidate Name Rep. Phil Gingrey, M.D.			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2008 General		
	State: GA District: 11		√		
	Full Name (Last, First, Middle Initial) Committee To Elect Chris Murp	hy			Transaction ID: 23744989 Date of Disbursement
	Mailing Address P.O. Box 127				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & O \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & 8 \end{bmatrix} $
	City Cheshire	State CT	Zip Code 06410		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1000.00
	Candidate Name Rep. Chris Murphy			Category/ Type	
	Office Sought: X House	Disbursement For: X Primary	2008 General		
	Senate President	Other (spe	ecify) 🔻		
	<u> </u>	Other (spe	ecify) 🔻		

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		E NUMBER: PAGE 45 / 60
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check on 21b 27	22 X 23 24 25 3 28b 28c 29 3
An	y Information copied from such Reports and Stater for commercial purposes, other than using the nam	nents may n	ot be sold or use	d by any person	for the purpose of soliciting contributions
V	NAME OF COMMITTEE (In Full)	ie and addre	ess of any politica	committee to s	olicit contributions from such committee
\rangle	American College of Radiology Association	n			
	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress				Transaction ID: 23745001 Date of Disbursement
	Mailing Address P.O. Box 2232				$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & D \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
	City Jenkintown	State PA	Zip Code 19046		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1000.00
	Candidate Name Rep. Allyson Schwartz			Category/ Type	
	Office Sought: X House Disburs Senate President	ement For: Primary Other (spe	2008 X General ecify) ▼		
	State: PA District: 13				
	Full Name (Last, First, Middle Initial) Dutch Ruppersberger For Congress				Transaction ID: 23745102 Date of Disbursement
	Mailing Address 22 West Padonia Road	Suite C-14	1		03 7 11 7 2008
	City Timonium	State MD	Zip Code 21093		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2000.00
	Candidate Name Rep. C.A. Ruppersberger			Category/ Type	
	Office Sought: X House Disburs Senate President	ement For: Primary Other (spe	2008 X General		
	State: MD District: 02				
	Full Name (Last, First, Middle Initial) Citizens For Harkin				Transaction ID: 23745113 Date of Disbursement
	Mailing Address P O Box 811				03 13 7 2008
	City Des Moines	State IA	Zip Code 50304		Amount of Each Disbursement this Period
					1500.00
	Purpose of Disbursement			011	
	Purpose of Disbursement Candidate Name Sen. Tom Harkin			011 Category/ Type	
	Candidate Name Sen. Tom Harkin Office Sought: House Disburs X Senate President	ement For: Primary Other (spe	2008 X General ecify)	Category/	
	Candidate Name Sen. Tom Harkin Office Sought: X Senate Disburs	Primary	X General	Category/	

		(FEC FOIII)	· 1		arate schedule(s)		eck onl	NUMBE	n.		L	PAGE	46/0	00
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		d from such Reports loses, other than usi												3
\setminus	NAME OF COMM													
<u> </u>	Full Name (Last, F Earl Pomeroy F							Date	of Di	sburs	237 ement			
	Mailing Address	P.O. Box 9336						0 ^M 3	М	1	4 /	Y	ž 0 ŏ 8	3 ^Y
	City Fargo			State ND	Zip Code 58106			Amou	ınt of	Each	Disbu		nt this F	
	Purpose of Disbur	sement				011				•		1.	500.00	0
	Candidate Name Rep. Earl Pome					ateg Typ	-							
	Office Sought:	X House Senate President	Disburser	ment For: Primary Other (spe	2008 X General ecify) ▼									
_	State: ND Full Name (Last, F	District: 01 irst, Middle Initial)						Trans	saoti.	on ID:	237	4510		
		Congress Commi	ttee							sburs	ement			Υ
	Mailing Address	PO Box 360						0 3		1	8 /	2	ž 0 ŏ 8	3
	City Prescott			State AR	Zip Code 71857			Amou	ınt of	Each	Disbu		nt this F	
	Purpose of Disbur	sement				011		<u> </u>		•		5	00.00	Ü
	Candidate Name Rep. Michael R	oss				ateg Typ	•							
	Office Sought:	X House Senate President	Disburser	ment For: Primary Other (spe	2008 X General									
	State: AR Full Name (Last, F	District: 04 irst, Middle Initial)						Trans	saoti.	on ID:	237	4510	ο	
	Andy Harris For	Congress						Date		sburs	ement			Υ
	Mailing Address	PO Box 1527						0 ^M 3			3 /	2	ž 0 č 8	3
	City Annapolis			State MD	Zip Code 21404			Amou	ınt of	Each	Disbu		nt this F	
	Purpose of Disbur	sement				011						5	00.00	Ü
	Candidate Name Andrew Harris					ateg Type								
	Office Sought:	X House Senate President	Disburser	ment For: Primary Other (spe	2008 X General									
	State: MD	District: 01												

ITEMIZED D	B (FEC Form 3X)	Use separ	rate schedule(s)		E NUMBER: PAGE 47 / 60
	ISBURSEMENTS	for each ca	ategory of the Summary Page	(check on 21b 27	ly one) 22
					for the purpose of soliciting contributions olicit contributions from such committee
NAME OF CON	MMITTEE (In Full) llege of Radiology Associati		o a any pontion		
	r, First, Middle Initial) e For Congress Inc.				Transaction ID: 23745212 Date of Disbursement
Mailing Address	P.O. Box 61337				03 05 7 2008
City Denver		State CO	Zip Code 80206		Amount of Each Disbursement this Perio
Purpose of Disb				011	2000.00
Candidate Name Rep. Diana D	eGette			Category/ Type	
Office Sought:	Senate President	sement For: X Primary Other (spec	2008 General cify) ▼		
•	District: 01 ;, First, Middle Initial) revatives Fund				Transaction ID: 23745414 Date of Disbursement
Mailing Address	P. O. Box 2752				03
City Washington		State DC	Zip Code 20013		Amount of Each Disbursement this Perio
Purpose of Disb	ursement			011	2000.00
Candidate Name House Conse				Category/ Type	
Office Sought:	House Disburs	Primary	General		
	President	Other (spec	Jily) ♥		
State: Full Name (Last	District:	Other (spec	ыу) ү		Transaction ID: 23745430 Date of Disbursement
Full Name (Last	District: , First, Middle Initial) orado	Other (spec	∀		
Full Name (Last Udall For Col	District: ;, First, Middle Initial) orado	State CO	Zip Code 80204		Date of Disbursement O 3 O 5 O 8 Amount of Each Disbursement this Perio
Full Name (Last Udall For Col- Mailing Address City Denver Purpose of Disk	District: i, First, Middle Initial) orado PO Box 40158 pursement	State	Zip Code	011	Date of Disbursement O 3 D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last Udall For Col- Mailing Address City Denver Purpose of Dist Candidate Name Mr. Mark Uda	District: I, First, Middle Initial) orado PO Box 40158 Dursement e	State CO	Zip Code 80204	011 Category/ Type	Date of Disbursement O 3
Full Name (Last Udall For Col- Mailing Address City Denver Purpose of Dist	District: T, First, Middle Initial) orado PO Box 40158 Dursement e III House Disburs	State	Zip Code 80204	Category/	Date of Disbursement O 3

	B (FEC Form 3X) SBURSEMENTS		arate schedule(s) category of the		NE NUMBER: only one)	PAGE 48/60
		Detailed	Summary Page	21k	28a 28	b 28c 29
	ed from such Reports and St rposes, other than using the					
NAME OF COM	MITTEE (In Full) ege of Radiology Associa					
•	First, Middle Initial)				Transaction Date of Disbu	ID: 23745498
Mailing Address	P.O. Box 530788				03 /	05 / 2008
City Livonia		State MI	Zip Code 48153		Amount of Ea	ach Disbursement this Perio
Purpose of Disbu	ursement			011	T L	2500.00
Candidate Name Rep. Thaddeu				Category/ Type	'	
Office Sought:	Senate President	Oursement For: X Primary Other (spe	2008 General			
State: MI	District: 11					
, .	First, Middle Initial) ain Street Partnership PA	AC			Date of Disbu	
Mailing Address	c/o G&W 2201 Wisco Suite 320	onsin Ave. NV	V		03 /	05 7 2008
City Washington		State DC	Zip Code 20007		Amount of Ea	ach Disbursement this Perio
Purpose of Disbu	ırsement			011	1	1000.00
Candidate Name Republican Ma	ain Street Partnership PA	AC .		Category/ Type		
Office Sought:	House Disk Senate President	oursement For: Primary Other (spe	General			
State:	District: First, Middle Initial)					
	gress Committee				Date of Disbu	
Mailing Address	205 South 5th Ave Suite 428				0 3 1	D D Y 2 O O 8 Y
City La Crosse		State WI	Zip Code 54601		Amount of Ea	ach Disbursement this Perio
Purpose of Disbu	ursement			011	1	2000.00
Candidate Name Rep. Ron Kind				Category/ Type		
Office Sought:	Senate	Dursement For: Primary Other (and	2008 X General			
State: WI	President District: 03	Other (spe	ecity) 🔻			
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule((check onl	NUMBER: PAGE 49 / 60
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American College of Radiology Associat	ion		
Full Name (Last, First, Middle Initial) Prosperity Helps Inspire Liberty Political	Action		Transaction ID: 23745520 Date of Disbursement
Mailing Address PO Box 26366			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria	State Zip Code VA 22313		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Prosperity Helps Inspire Liberty Political	Action	Category/ Type	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: 23749251
Democratic Congressional Campaign Confidence Mailing Address 430 South Capitol Street			Date of Disbursement 0 3 7 0 5 7 2 0 0 8
2nd Floor			
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	15000.00
Candidate Name Democratic Congressional Campaign Co	ommittee	Category/ Type	
Office Sought: Senate President State: Disbu	rsement For: Primary General Other (specify) ▼	•	
Full Name (Last, First, Middle Initial) Reed Committee			Transaction ID: 23749908 Date of Disbursement
Mailing Address PO Box 8628			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Cranston	State Zip Code RI 02920		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	3000.00
Candidate Name Sen. Jack Reed		Category/ Type	
X Senate President	xsement For: 2008 X Primary General Other (specify) ▼	•	
State: RI District:			
			20000.00

В.

C.

SCHEDULE B (FEC Form 3X)		se separate schedule(s)					UMBE	R:		P	AGE	50 /	60
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American College of Radiology Association	n												
Full Name (Last, First, Middle Initial) Reed Committee									on ID: sburse	23749 ement	9943	3	
Mailing Address PO Box 8628							0 ^M 3	М	0	6 /	2	ó o š	3 ^Y
City Cranston	State RI	Zip Code 02920					Amou	int of	f Each	Disburse	emer	nt this I	Period
Purpose of Disbursement			Г	0	11		L.	-			20	0.000	0
Candidate Name Sen. Jack Reed			Ca	at	egory/ ype								
X Senate President	ement For: Primary Other (spe	2008 X General ecify) ▼											
State: RI District:				_									
Full Name (Last, First, Middle Initial) Tuesday Group PAC							Date	of Di	sburse				V
Mailing Address P.O. Box 40385							0 ^M 3	М	0	6 /	2	0 ŏ 8	3 1
City Washington	State DC	Zip Code 20016					Amou	int of	f Each	Disburse	-		
Purpose of Disbursement				0	11						30	0.00	0
Candidate Name Tuesday Group PAC					egory/ ype								
Senate President	ement For: Primary Other (spe	General cify) ▼											
State: District:													
Full Name (Last, First, Middle Initial) Schakowsky For Congress							Date of		on ID: sburse	2375 ⁻ ement			V
Mailing Address P.O. Box 5130							0 3	IVI	1	1 ′	2	Ó 0 Ó 8	3
City Evanston	State IL	Zip Code 60204					Amou	int of	f Each	Disburse	-		
Purpose of Disbursement				0	11		L.	_			2	500.0	Ü
Candidate Name Rep. Janice D. Schakowsky					egory/ ype								
Senate President	ement For: Primary Other (spe	2008 X General ecify) ▼		_									
State: IL District: 09													
SUBTOTAL of Disbursements This Page (optional)					. •						75	0.00	0

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)

TEMES DISPUSSION	Use separate schedule(s)		neck only	NUMBE one)	١			170	GE 51	7 00
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a		23 28b	$ldsymbol{\sqcup}$	24 28c	25 29	
Any Information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American College of Radiology Association	ne and address of any political									
Full Name (Last, First, Middle Initial)								75.45	70.4	
Friends Of Lois Capps				Date of 0 3		sburse	_	-	/81 Ž 0 d	Y
Mailing Address PO Box 23940										
City Santa Barbara	State Zip Code CA 93121			Amou	nt of	Each	Disb	urser	nent thi	
Purpose of Disbursement		01	1	<u> </u>	_			_	1500.	00
Candidate Name Rep. Lois Capps		Categ Typ								
Office Sought: X House Senate President State: CA District: 23	ement For: 2008 Primary X General Other (specify)									
Full Name (Last, First, Middle Initial)				Trans	actio	on ID:	: 23	7517	784	
David Davis Victory Fund				Date of			_	_		Y
Mailing Address PO Box 781				0 3			1	Ĺ	ž o d	8
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Full Name (Last, First, Middle Initial) John Lewis For Congress				Trans		_			325	
Mailing Address 1520 Pinehurst Drive S	N			0 ^M 3	M /	^D 1	2	/ Y	ž 0 č	8 °
City Atlanta	State Zip Code GA 30311			Amou	nt of	Each	Disb	urser	nent thi	s Period
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NAME OF COMMITTEE (In Full) American College of Radiology Association	•••			
Full Name (Last, First, Middle Initial) Kirk For Congress			Transaction ID: 2375 Date of Disbursement	51852
Mailing Address P.O. Box 8			03	[°] 2008
City Winnetka	State Zip Code IL 60093		Amount of Each Disbur	
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Candidate Name Rep. Mark Steven Kirk		Category/ Type		
Senate President	ement For: 2008 Primary X General Other (specify)			
State: IL District: 10				
Full Name (Last, First, Middle Initial) Team Sununu			Transaction ID: 2375 Date of Disbursement	
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City Rye	State Zip Code NH 03870		Amount of Each Disbur	
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	ement For: 2008 Primary General Other (specify)			
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Souder For Congress Inc.			Date of Disbursement	
Mailing Address P.O. Box 40233			03 / 05	^Y 2008 ^Y
City Fort Wayne	State Zip Code IN 46804		Amount of Each Disbur	
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Candidate Name Rep. Mark Souder	C	Category/ Type		
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<u>\</u>	NAME OF COMMITTEE (In Full)	The Harrie and address	or any pointour		note contributions from Such Committee
\rangle	American College of Radiology Ass	ociation			
	Full Name (Last, First, Middle Initial) Moran For Congress				Transaction ID: 23793493 Date of Disbursement
	Mailing Address 44 Canal Center I	Plaza 2nd Flr			
	2nd Floor City	State	Zip Code		Amount of Each Disbursement this Perioc
	Alexandria	VA	22314		
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	Candidate Name Rep. James P. Moran			Category/ Type	
	Office Sought: X House Senate	Disbursement For: Primary	2008 X General		
	State: VA District: 08	Other (spe	ecify)		
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	Mailing Address 25 East Main Stre	et Suite 200			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \end{bmatrix} \overset{M}{} \begin{bmatrix} \begin{smallmatrix} M \\ \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix}$
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	NAME OF COMMITTEE (In Full) American College of Radiology Associatio	· · · · · · · · · · · · · · · · · · ·									
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	Senate President	Primary General Other (specify) ▼									
 3.	State: District: Full Name (Last, First, Middle Initial) Pat Roberts For Senate						on ID:	23797	7803		
	Mailing Address PO Box 433					M		2 /	ž	o ŏ 8	Y
	City Great Bend	State Zip Code KS 67530			Amou	ınt of	Each	Disburse	ement	this F	eriod
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).	Full Name (Last, First, Middle Initial) Tim Ryan For Congress						on ID:	23797 ement	7804		
	Mailing Address 1600 Roosevelt Avenue Suite 804				0 3	М	1	3 /	ž	o ŏ 8	Y
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NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Kevin Mccarthy For Congress Mailing Address P.O. Box 12667 City State Zip Code Bakersfield CA 93389 Purpose of Disbursement Candidate Name Rep. Kevin McCarthy Office Sought: House Disbursement For: 2008 Senate President State Zip Code Obsbursement City State Zip Code Senate President State Senate President State: District: 22 Full Name (Last, First, Middle Initial) National Republican Congressional Committee Office Sought: Senate Disbursement For: 2008 Washington DC 20003 Purpose of Disbursement Candidate Name National Republican Congressional Committee District: Primary General Office Sought: State Disbursement For: 2008 Washington DC 20003 Purpose of Disbursement Candidate Name National Republican Congressional Committee District: Primary General Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: State Zip Code Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Amount of Each Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Amount of Each Disbursement Office Sought: Other (specify) ▼ Amount of Each Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Date of Disbursement Office Sought: Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Office Sought: Other (specify) ▼ Office Sought: Other (specify) ▼ Date of Disbursement Office Sought: Other (specify) ▼ Office Sought: Oth	25 29
NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Kevin McCarthy For Congress Mailing Address P.O. Box 12667 City State Zip Code CA 93389 Purpose of Disbursement Candidate Name Rep. Kevin McCarthy Office Sought: X House President State: CA District: 22 Full Name (Last, First, Middle Initial) National Republican Congressional Committee Mailing Address 320 First Street City State Zip Code CA 93389 Amount of Each Disbursement Type Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify) ▼ Transaction ID: 23805 Date of Disbursement Other (specify)	ontributions committee
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Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) National Republican Congressional Committee City State Zip Code Washington DC 20003 Purpose of Disbursement Candidate Name National Republican Congressional Committee Full Name (Last, First, Middle Initial) State Zip Code DC 20003 Purpose of Disbursement Candidate Name National Republican Congressional Committee Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) National Republican Congressional Committee Mailing Address 320 First Street City State Zip Code Date of Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) National Republican Congressional Committee City State Zip Code Washington DC 20003 Purpose of Disbursement City State Zip Code Washington DC 20003 Purpose of Disbursement Candidate Name National Republican Congressional Committee Office Sought: House Disbursement For:	
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NAME OF COMMITTEE (In Full) American College of Radiology Associate	·		
Full Name (Last, First, Middle Initial) Wicker for Senate			Transaction ID: 23963067 Date of Disbursement
Mailing Address P.O. Box 874			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & N \\ I & 2 & O & 0 & 8 \end{bmatrix}$
City Tupelo	State Zip Code MS 38802		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Sen. Roger Wicker		Category/ Type	
X Senate President	rsement For: 2008 Primary X General Other (specify)		
State: MS District: Full Name (Last, First, Middle Initial)			Transaction ID: 23963107
Friends Of Gayle Harrell			Date of Disbursement
Mailing Address 1885 N.W. Eagle Point	l .		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Stuart	State Zip Code FL 34994		Amount of Each Disbursement this Perio
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Candidate Name Mr. Gayle Harrell		Category/ Type	
Senate President	rsement For: 2008 X Primary General Other (specify) ▼	•	
State: FL District: 16 Full Name (Last, First, Middle Initial)			Transaction ID: 23964320
Cathy Mcmorris For Congress			Date of Disbursement O 3 1 2 0 0 8
Mailing Address Box 137			
City Spokane	State Zip Code WA 99210		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Cathy McMorris		Category/ Type	
Senate President	rsement For: 2008 X Primary General Other (specify) ▼		
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President

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NAME OF COMMITTEE (In Full)		
American College of Radiology Association	l	
Full Name (Last, First, Middle Initial)		Transaction ID: 23964638
Committee To Elect Chris Murphy		Date of Disbursement
Mailing Address P.O. Box 127		03
	State Zip Code	Amount of Each Disbursement this Period
	CT 06410	2000.00
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Candidate Name	Categor	y/
Rep. Chris Murphy	Туре	
	ment For: 2008	
Senate X President	Primary General Other (specify) ▼	
State: CT District: 05	Tarior (Specify)	
Full Name (Last, First, Middle Initial)		Transaction ID: 23991925
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,	State Zip Code	Amount of Each Disbursement this Period
	DC 20013	2000.00
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NAME OF COMMITTEE (In Full) American College of Radiology Association	١		
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Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		Bank Fees
State: District: Full Name (Last, First, Middle Initial)			
Virginia Department of Taxation			Transaction ID: 25982422 Date of Disbursement
Mailing Address P.O. Box 1500			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & O & N \\ I & 2 & O & O & N \end{bmatrix}$
City Richmond	State Zip Code VA 23218-1500		Amount of Each Disbursement this Period
Purpose of Disbursement State Taxes	Г	001	758.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		State Taxes

		1501.96
SUBTOTAL of Disbursements This Page (optional)		1501.86
TOTAL This Period (last page this line number only)	•	1501.86

State:

A.

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50	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 60 / 60		
Т	EMIZED DISBURSEMENTS	for each category of the	(check onl	y one)		
•		Detailed Summary Page	X 21b	22 23 24 25 26		
			27	28a 28b 28c 29 30b		
	y Information copied from such Reports and Statem		, ,			
or f	or commercial purposes, other than using the name	e and address of any political co	mmittee to so	plicit contributions from such committee		
\	NAME OF COMMITTEE (In Full)					
	American College of Radiology Association	1				
	Full Name (Last, First, Middle Initial)			Transaction ID: 25982284		
	Bank of America			Date of Disbursement		
	Mailing Address P.O. Box 27025			03		
	City	State Zip Code		Amount of Each Disbursement this Period		
	Richmond	VA 23261-7025				
	Purpose of Disbursement		4121.00			
	Federal Taxes		001			
	Candidate Name		Category/			
			Type			
	Office Sought: House Disburse	ment For:		Federal Taxes		
	Senate	Primary General		i euciai i axes		
	President	Other (specify)				
	State: District:					

SUBTOTAL of Disbursements This Page (optional)	•	4121.00
TOTAL This Period (last page this line number only)	•	4121.00